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Dated: 11/19/03

Signature:

(Elizabeth A. Hanley)

Docket No.: HLZ-001US  
(PATENT)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Patent Application of:  
Mats Paulsson *et al.*

Application No.: 10/019067

Group Art Unit: 1645

Filed: June 28, 2002

Examiner: *Not Yet Assigned*

For: **DIAGNOSIS OF GLUTEN SENSITIVE  
ENTEROPATHY AND OTHER  
AUTOIMMUNOPATHIES**

**REQUEST FOR CORRECTED FILING RECEIPT**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

Applicants hereby request that a corrected Filing Receipt be issued in the above-identified patent application. The official Filing Receipt received by Applicants, a copy of which is attached hereto, has an error in:

Foreign Applications: This application is a 371 of EPSN 99111975.1 06/28/1999.

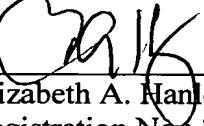
Applicants additionally request that all pertinent U.S. Patent and Trademark Office records relating to the subject application be changed to reflect this correction.

Applicants believe no fee is due with this request. However, if a fee is due, please charge our Deposit Account No. 12-0080, under Order No. HLZ-001US, from which the undersigned is authorized to draw.

Dated: 11/19/03

Respectfully submitted,

By

  
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UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
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 WASHINGTON, D.C. 20231  
[www.uspto.gov](http://www.uspto.gov)

APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY.DOCKET.NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
10/019,067	06/28/2002	1645	510	HLZ-001US	12	9	2

**CONFIRMATION NO. 7795**

000959  
 LAHIVE & COCKFIELD  
 28 STATE STREET  
 BOSTON, MA 02109

**FILING RECEIPT**



\*OC000000008692174\*

Date Mailed: 08/28/2002

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Filing Receipt Corrections, facsimile number 703-746-9195. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

**Applicant(s)**

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**Domestic Priority data as claimed by applicant**

THIS APPLICATION IS A 371 OF PCT/EP00/06025 06/28/2000

**Foreign Applications**

THIS APPLICATION IS A 371 OF EPSN 99111975.1 06/28/1999

**Projected Publication Date:** Not Applicable, filed prior to November 29,2000

**Non-Publication Request:** No

**Early Publication Request:** No

**\*\* SMALL ENTITY \*\***

**Title**

Diagnosis of gluten sensitive enteropathy and other autoimmunopathies